

VA ELECTRONIC HEALTH RECORD MODERNIZATION (EHRM) SYSTEM PERFORMANCE WORK STATEMENT (PWS) DEPARTMENT OF VETERANS AFFAIRS

Office of Electronic Health Record Modernization (OEHRM)

Registry and Report Development for IOC

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1.0 BACKGROUND

The mission of the Department of Veterans Affairs (VA) is to provide benefits and services to Veterans of the United States. In meeting these goals, VA strives to provide high quality, effective, and efficient Information Technology (IT) services to those responsible for providing care to the Veterans at the point-of-care as well as throughout all the points of the Veterans' health care in an effective, timely and compassionate manner. VA depends on Information Management/Information Technology (IM/IT) systems to meet mission goals.

On May 17, 2018, VA entered into a ten-year indefinite-delivery, indefinite-quantity (ID/IQ) sole-source contract with Cerner Government Services, Inc. (Cerner) to acquire the Electronic Health Record (EHR) system being deployed by the Department of Defense (DoD) and related services for deployment and transition across the VA enterprise in a manner that meets VA needs, and which will enable seamless healthcare to Veterans and qualified beneficiaries. Procurement of a single common system across VA and DoD shall achieve VA's goal of seamless care for Veterans by facilitating the transition of active duty military members to VA and improving their timely access to the highest quality of care.

Cerner's EHR solution shall provide VA with a single system that can store and retrieve administrative, clinical, laboratory, radiology, pharmacy and scheduling data, and can interact with other internal and external systems. Modernization of VA's EHR will support a Veteran-centric, team-based care model, with modern decision support tools; clinical information content services; identification, communication and standardization of care paths; and resource provisioning. This will improve interoperability, performance, and user experience for the majority of the health care delivery and ancillary teams responsible for directly or indirectly providing health care services; and in turn will improve quality, safety, and timeliness of health care services delivered to Veterans.

Cerner shall provide a comprehensive EHR solution and services as specifically defined in the EHRM Basic contract. This task order requires configuration, development testing and execution of registries and reports required for EHRM Initial Operating Capability (IOC).

2.0 APPLICABLE DOCUMENTS

This Task Order (TO) effort PWS is within the scope of paragraph 5.5, "VA Enterprise EHRM Baseline Preparation," of the EHRM Basic PWS.

3.0 SCOPE OF WORK

The Contractor shall provide development, testing and execution in support of registries and reports required for EHRM Initial Operating Capability. These tasks include:

- a. Project Management
- b. Registry Development
- c. Report Development
- d. Training
- e. Development of Measures
- f. Optional tasks for additional registries and reports

3.1 APPLICABILITY

This Task Order (TO) effort PWS is within the scope of paragraph 5.5, "VA Enterprise EHRM Baseline Preparation," of the EHRM Basic PWS.

3.2 ORDER TYPE

The effort shall be proposed on a Firm Fixed Price (FFP) basis.

4.0 PERFORMANCE DETAILS

4.1 PERFORMANCE PERIOD

The period of performance (PoP) shall be 12 months from the date of award, with two 3-month option periods and two optional tasks that may be exercised during the PoP.

4.2 PLACE OF PERFORMANCE

Efforts under this TO shall be performed both in Contractor facilities, as well as VA facilities. Program meetings may also be held at VA Central Office, some of which may require in-person attendance. Project management activities that occur at the enterprise level shall be performed at Contractor facilities.

4.3 TRAVEL OR SPECIAL REQUIREMENTS

The Government anticipates travel to perform the tasks associated with the effort, as well as to attend program-related meetings or conferences throughout the PoP. The Contractor shall include all estimated travel costs in the firm-fixed price line items. These costs will not be directly reimbursed by the Government.

The total estimated number of trips for this effort shall be proposed by the Contractor. Anticipated locations include, but are not limited to, Washington, DC and Veterans Integrated Service Network (VISN) 20 IOC site locations. The Contractor shall review travel under this TO on a quarterly basis. Based on this quarterly review, the Contractor shall inform VA of project risks related to travel.

4.4 CONTRACT MANAGEMENT

All requirements of Section 9.0 of the EHRM Basic PWS apply to this effort. This TO shall be addressed in the Contractor's Monthly Progress Report as set forth in the EHRM Basic contract.

4.5 GOVERNMENT FURNISHED PROPERTY

The Government has multiple remote access solutions available to include Citrix Access Gateway (CAG), Site-to-Site Virtual Private Network (VPN), and RESCUE VPN.

The Government's issuance of Government Furnished Equipment (GFE) is limited to Contractor personnel requiring direct access to the network to: development environments; install, configure and run Technical Reference Model (TRM) approved software and tools (e.g., Oracle, Fortify, Eclipse, SoapUI, WebLogic, LoadRunner); upload/download/ manipulate code, run scripts, and apply patches; configure and change system settings; check logs, troubleshoot/debug, and test/QA.

When necessary, the Government will furnish desktops or laptops, for use by the Contractor to access VA networks, systems, or applications to meet the requirements of this PWS. The overarching goal is to determine the most cost-effective approach to providing needed access to the VA environment coupled with the need to ensure proper Change Management principles are followed. Contractor personnel shall adhere to all VA system access requirements for on-site and remote users in accordance with VA standards, local security regulations, policies and rules of behavior. GFE shall be approved by the COR and Program Manager on a case-by-case basis prior to issuance.

Based upon the Government assessment of remote access solutions and requirements of this TO, the Government estimates that no GFE will be required by this effort.

The Government will not provide IT accessories including but not limited to Mobile Wi-Fi hotspots/wireless access points, additional or specialized keyboards or mice, laptop bags, extra charging cables, extra Personal Identity Verification card readers, peripheral devices, or additional Random Access Memory (RAM). The Contractor is responsible for providing these types of IT accessories in support of this effort as necessary and any VA installation required for these IT accessories shall be coordinated with the COR.

4.6 SECURITY AND PRIVACY

All requirements in Section 7.0 of the EHRM Basic PWS apply to this effort.

It has been determined that protected health information may be disclosed or accessed and a signed Business Associate Agreement (BAA) shall be required. The Contractor shall adhere to the requirements of the BAA executed between OEHRM and Cerner Corporation; and shall comply with VA Directive 6066 and VHA Handbook 1605.05.

4.6.1 POSITION/TASK RISK DESIGNATION LEVEL(S)

The position sensitivity and the level of background investigation commensurate with the required level of access for all PWS tasks is Tier3/Non-Critical Sensitive in accordance with Section 8.7 of the EHRM Basic PWS.

The Tier3/ Non-Critical Sensitive Position Sensitivity and Background Investigation requirements identify, in effect, the Background Investigation requirements for Contractor individuals, based upon the tasks the particular Contractor individual will be working. The submitted Contractor Staff Roster must indicate the required Background Investigation Level for each Contractor individual based upon the tasks the Contractor individual will be working, in accordance with their submitted proposal.

5.0 SPECIFIC TASKS AND DELIVERABLES

The Contractor shall perform the following:

5.1 PROJECT MANAGEMENT

The Contractor shall provide a single Point of Contact for management of all project tasks, with individual subject matter experts assigned to each individual task. The Contractor shall include a Communications Plan in the CPMP to cover overall and individual POC communications as well as issue escalation procedures.

5.1.1 CONTRACTOR PROJECT MANAGEMENT PLAN

The Contractor shall deliver a Contractor Project Management Plan (CPMP) that lays out the Contractor's approach, timeline and tools to be used in execution of this TO. The CPMP should take the form of both a narrative and graphic format that displays the schedule, milestones, risks and resource support. The CPMP timeline and schedule shall include Cerner as well as VA dependencies for registry and report development.

The CPMP shall also include how the Contractor shall coordinate and execute planned, routine, and ad hoc data collection reporting requests as identified within the PWS. The initial baseline CPMP shall be concurred upon and updated in accordance with Section B of the TO. The Contractor shall update and maintain the VA Program Manager (PM) approved CPMP throughout the PoP.

Deliverable:

A. Contractor Project Management Plan

5.1.2 REPORTING REQUIREMENTS

The Contractor shall provide a Monthly Progress Report in accordance with Section 9.6.1.1 of the EHRM Basic PWS. The Monthly Progress Report shall include status and timelines on all registries and reports completed, in development and in the pipeline for IOC. The Monthly Progress Report shall be divided into separate sections for registries and for reports to facilitate review by VA content owners.

For each major work element described in this TO, Cerner will provide/update applicable architectures/documentation as part of the VIP Technical Documentation required by PWS paragraph 5.2. These updates may include requirements, architecture (updates to existing OV-1, SvcV-1, SV-1), development views, data models, data flow diagram, and decision package for EHRM governance approval. Registry and report development shall not proceed without approval of the decision package from the Technical Governance Board resulting in an Authorization to Proceed (ATP).

Deliverable:

A. Monthly Progress Report

5.1.3 TECHNICAL KICKOFF MEETING

The Contractor shall hold a technical kickoff meeting within 10 days after TO award. The Contractor shall present, for review and approval by the Government, the details of the intended approach, work plan, and project schedule for each effort. The Contractor shall specify dates, locations (can be virtual), agenda (shall be provided to all attendees at least five calendar days prior to the meeting), and meeting minutes (shall be provided to all attendees within three calendar days after the meeting). The Contractor shall invite the Contracting Officer (CO), Contract Specialist (CS), COR, and the VA PM.

5.1.4 IOC GO-LIVE COORDINATION

The Contractor shall coordinate scheduling and go-live activities with the EHRM IOC deployment team to ensure all stakeholders are informed of risks, timelines, and go-live tasks required. The Contractor shall provide monthly status updates focused on IOC deployment go-live activities to ensure effective communication between the relevant TO teams.

5.2 IOC REGISTRIES DEVELOPMENT (Base Period Only)

The Contractor shall configure/develop HealtheRegistries based on analyses performed under PWS Task 5.3.2: Registry Requirements Analysis task of Task Order 4.

New Development HealtheRegistries and Measures Applicable to VA:

The Contractor shall develop VA-specific HealtheRegistries and measures to include five new HealtheRegistries and up to 80 new measures. The five new HealtheRegistries may include: Traumatic Brain Injury, Spinal Cord Injury and Disease, Hepatitis B, Chronic Kidney Disease Stage V/Dialysis, and Advanced Liver Disease.

The up to 80 new measures may be designed within the five registries above as well as developing new, VA-specific measures to the commercially available HealtheRegistries laid out in Task Order 4. The current backlog of HealtheRegistries and measures is provided as Attachment B.

The Contractor shall work with VA to document and complete HealtheRegistry prerequisites, establish a validation strategy, and establish an implementation timeline. Items shall be documented in a Detailed HealtheRegistry Migration Plan, Requirements and Timeline document. Upon concurrence by VA, the plan shall be implemented to provide VA access to HealtheRegistries for IOC.

For each HealtheRegistry, the Contractor shall:

- a. Work with VA to review and configure inclusion/exclusion criteria, clinical reminders, performance metrics, and resolution rules to meet VA requirements
- b. Work with VA to implement configurations required at the enterprise level including attribution.
- c. Work with VA to establish the HealtheRegistries governance for access, registry and content requests
- d. Synchronize with supporting HealtheIntent (HeI) interface requirements including items such as:
 - Patient Care Management Module (PCMM) Web following VIP for Major Programs - Interface Development Guide.
 - Health Eligibility Enrollment Files
- e. Provide access to all VA HealtheRegistries for user training and acceptance prior to transition to the IOC go-live production environment. Train HealtheRegistry VA Administrators and users.
- f. Test to ensure that HealtheRegistries and their content are production ready; provide a Test Report of Findings/Test Analysis Report to VA for review and approval. The Contractor Test Report of Findings/Test Analysis Report shall serve as the key test artifact for the formal deliverable process. Other test artifacts: test cases, test results, etc. shall be entered and maintained in tools as outlined in Contractor Master Test Plan and OEHRM Test Evaluation Master Plan as the work is being executed.
- g. Provide Functional and Technical Documentation for each HealtheRegistry including:
 - 1. Create/update a Wikipage containing technical and functional specifications including inclusion/exclusion criteria and metric definition.
 - 2. Functional documentation and user guide/training manual for VA users. All user materials shall be reviewed and approved by VA prior to issuance.

Additional supporting functions may be developed via the use of Optional Task 5.7 below.

Deliverable:

- A. Detailed HealtheRegistry Migration Plan, Requirements and Timeline document
- B. Test Report of Findings/Test Analysis Report
- C. Functional and Technical Documentation for each registry

5.3 IOC-SITE SPECIFIC REPORTS DEVELOPMENT

The Contractor shall provide a report development team comprised of management, reporting, and engineering subject matter experts to configure/develop and test reports required for IOC. The Contractor's reports development team shall provide support development of custom reporting projects required for IOC. The Contractor shall work with the VA Reporting and Registries workgroup to identify projects, develop specifications, set development priorities, and support testing/validation activities. The technical skill sets comprising the report development team shall evolve to match the requirements of the tasks being performed.

A high-level summary EHRM Reports by Council allocated by working group and subject matter is included in Attachment B.

The Contractor shall develop enhancements to Cerner Standard Commercially Available reports to meet VA-specific customization requirements not addressed under TO 4 and develop custom reports to meet VA-specific reporting needs required to be operational prior to IOC.

Custom reporting projects may include multiple functionalities within several platforms to include:

- Functionalities: Reports, mPages, mPages components, Discern alerts
- Platforms: Millennium (Cerner Command Language, Business Objects, Discern Analytics 2), HealtheEDW (Tableau, Business Objects)
- Topics such as Daily Discharge Follow Up List, Clinic Huddle Planning etc.

The Contractor report development team shall:

- Collaborate finetuning of report requirements with VA functional council lines; form requirements teams comprised of Council and Report Subject Matter Experts (SMEs)
- b. Perform and document a feasibility assessment, based on connected systems and available data sources, and project timelines; Identify data syndication or interface requirements or gaps as necessary
- c. Create requirements and specifications in coordination with VA

- d. Develop and test reports
- e. Perform issue resolution in support of testing/validation, and live implementation
- f. Provide training and user documentation to VA for all reporting tools developed under this TO for the IOC staff. Include test records for use during training activities.
- g. Provide Report Documentation for each report created for VA, as applicable. Report Documentation shall include:
 - a. Report Name
 - b. Description
 - c. Platform (Millennium or Hel)
 - d. Report Tool (Cerner Command Language (CCL), Lights On, Business Objects, etc.)
 - e. Health System (Ambulatory, Emergency Medicine, Lab, etc.)
 - f. Key Performance Indicators (KPIs)
 - g. Security Roles/Positions
 - h. Sample Image of Report
 - i. Change Log and Supplemental Information
 - j. Overview (Required Applications, Intended Users, Performance Measures)
 - k. Using the Report (Accessing the Report, Report Prompts, Filter the Report, Customize the Report, Report Content, Report Frequency, Export and Email the Report)
 - I. Additional Resources
- h. Provide all reports for user training and acceptance prior to transition to the IOC go-live production environment
- i. Provide a light handoff of VHA reports to VHA analysts for continued maintenance, support and sustainment at IOC completion and with VA approval.

Additional report development teams required to accommodate VA reporting requirements may be added through exercise of the optional task in PWS task 5.6.

Deliverable:

A. Report Documentation

5.4 TRAINING FOR VA REPORT DEVELOPMENT TEAMS

The Contractor shall provide Millennium and Hel training for VA analysts. The purpose of this training is to provide understanding of Millennium and Hel data architectures and structures to support VA capabilities for custom report development and maintenance.

5.4.1 MILLENNIUM TRAINING

The Contractor shall provide two weeks of Millennium training to two classes of 15 VA attendees each. The training shall include:

- Medical Record Navigation and Functionality The Contractor shall train VA resources on how to navigate the computerized medical record and articulate basic functionality
- b. Data Identification The Contractor shall train VA resources on how to identify related data and present the data for review by a caregiver
- c. Basic Architecture The Contractor shall train VA resources on how to understand the basic architecture of the Cerner EHRM solution
- d. Data Collection The Contractor shall train VA resources on how to review data collection methods and current trends in electronic clinical medical records. The training shall also include a review of the forms used to clarify terminology
- e. Orderables The Contractor shall train VA resources to be conversant on orderables. The Contractor's training shall yield an understanding of the synonyms associated with different user types (ex. Lanoxin as Digoxin, etc.)
- f. Term Definition The Contractor shall train VA resources on the definitions for alias pools, order types, and order catalogs
- Query Language Contractor will provide instructor-led Millennium query language training to VA resources familiar with similar technology.

The Contractor shall deliver archivable and reusable high-level Millennium Reference Guides to allow future VA SME reference.

Deliverable:

A. Millennium Reference Guides

5.4.2 HEALTHEINTENT TRAINING

The Contractor shall provide Hel training. The Contractor shall:

- a. Provide non-hands-on virtual, instructor-led web-based training to 40 VA analysts on both HeI and HealtheEDW within 4 weeks of contract award.
- b. Provide on-site early access hands-on, collaborative training to two VA report developers/administrators. This training will occur upon receipt of DoD permission to view DoD Millennium data, and Millennium data loaded into Hel.
- c. Provide a draft course agenda for hands-on instructor-led Hel training for VA review and approval within 30 days of TO award.
- d. Provide hands-on, instructor led training to 30 report developers (2 classes of 15) representing each functional council. Training shall

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occur as soon as feasible after the VA production Hel environment is operational and is populated with Millennium production data.

e. Provide report development support to the VA team from the time of training completion through the end of this task order Period of Performance. This support shall be provided in the form of one hour twice weekly office hours to field questions, record questions and answers, and disseminate answers to the stakeholders.

The Contractor shall deliver archivable and reusable high-level Hel Reference Guides to allow future VA SME reference.

Deliverable:

A. Hel Reference Guides

5.5 DEVELOPMENT OF HEDIS MEASURES

The Contractor shall provide HEDIS-like measures and analytics tools to allow users to view and understand performance on HEDIS outcomes in near-real time to support informed decisions to improve patient care. Cerner is currently pursuing certification for the HEDIS administrative measures and will provide that capability upon certification.

The Contractor's HEDIS solution shall provide the following features:

- a. Measures and supporting facts to provide additional details about why a person qualified and what data was contributed. The HEDIS content shall be updated yearly, at a minimum, in alignment with timing driven by the governing body for HEDIS measures.
- b. Analysis and reporting powered by industry-leading business intelligence and analytic visualization tools, Tableau and SAP BusinessObjects.
- Executive dashboards providing an overall view of how organizations are performing across various measures as well as individual providers' populations and performance.
- d. User- and role-based dashboards and reports with on-the-fly filtering, navigation and data interaction using data marts designed around health care uses cases.

Deliverable:

A. HEDIS solution and content

5.6 ADDITIONAL REPORT DEVELOPMENT (OPTIONAL TASK)

The Contractor shall provide a report development team composed of approximately four to five Full Time Equivalents (FTEs) to configure/develop and test reports required

for IOC. The Contractor shall work with the VA Reporting and Registries Workgroup to identify projects, develop specifications, set development priorities, and support testing/validation activities. The technical skill sets comprising the report development team shall evolve to match the requirements of the tasks being performed.

VA may exercise this optional task for additional report development teams to provide report execution following the process described in Section 5.3 of this PWS. This optional task may be exercised no more than 15 times throughout the PoP of this TO.

5.7 ADDITIONAL TECHNICAL SUPPORT (OPTIONAL TASK)

Registry and report requirements continue to evolve to meet VA priorities and may require development, testing and support of additional technical capabilities supporting VA reports and registries throughout the PoP of this Task Order. This optional task may be exercised multiple times not to exceed the CLIN ceiling. Topics covered by this task may include such items as VA-specific and unified longitudinal registries, collaboration with VA in creation of data sets, models, and content and other capabilities needed in support of VA registries and reports.

5.8 OPTION PERIOD 1

The Contractor shall continue development and sustainment of all ongoing reporting tasks above for a Period of Performance of three months.

5.9 OPTION PERIOD 2

The Contractor shall continue development and sustainment of all ongoing reporting tasks above for a Period of Performance of three months.

6.0 GENERAL REQUIREMENTS

6.1 PERFORMANCE METRICS

The table below defines the Performance Standards and Acceptable Levels of Performance associated with this effort. The Government may also utilize the commercially available and VA-specific Key Performance Indicators (KPIs) and Service Level Agreements (SLAs) defined at the ID/IQ level to measure performance under this TO, as applicable.

Performance Objective	Performance Standard	Acceptable Levels of Performance
A. Technical / Quality of	 Shows understanding of requirements 	Satisfactory or higher
Product or Service	Efficient and effective in meeting requirements	

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Performance Objective	Performance Standard	Acceptable Levels of Performance
	 3. Meets technical needs and mission requirements 4. Provides quality services/products 5. Meets performance thresholds/metrics defined in applicable Service Level Agreements 	
B. Project Milestones and Schedule	Quick response capability Products completed, reviewed, delivered in accordance with the established schedule Notifies customer in advance of potential problems	Satisfactory or higher
C. Staffing	Currency of expertise and staffing levels appropriate Personnel possess necessary knowledge, skills and abilities to perform tasks	Satisfactory or higher
D. Invoicing	Invoices are current, accurate, and complete.	Satisfactory or higher
E. Management	Integration and coordination of all activities to execute effort	Satisfactory or higher

The COR will utilize a QASP throughout the life of the TO to ensure that the Contractor is performing the services required by this PWS in an acceptable level of performance. The Government reserves the right to alter or change the QASP at its own discretion. A Performance Based Service Assessment will be used by the COR in accordance with the QASP to assess Contractor performance.

6.2 SECTION 508 –INFORMATION AND COMMUNICATION TECHNOLOGY (ICT) STANDARDS

All requirements in Sections 8.10, including subparagraphs, of the EHRM Basic PWS apply to this effort. Deliverable requirements are further defined in the following subparagraphs. The Contractor shall comply with the technical standards at: https://www.access-board.gov/guidelines-and-standards/communications-and-it/about-the-ict-refresh/final-rule/single-file-version

6.2.1 REPRESENTATION OF CONFORMANCE

The Contractor shall provide a Section 508 Subject Matter Expert lead for VA EHRM 508 resources to work with. The Contractor shall adhere to the VA-approved Section 508 Test and Delivery Plan and Section 508 Accessibility Roadmap delivered under TO 0001. The Contractor shall update the Government Product Accessibility Template (GPAT) and/or Voluntary Product Accessibility Template (VPAT) delivered under TO 0001 to indicate the level of Section 508 conformance as updates are made to its products and/or services to ensure and sustain 508 compliance.

The Contractor shall work closely with VA Section 508 representatives to verify Section 508 conformance of its products and/or services.

6.2.2 ACCEPTANCE AND ACCEPTANCE TESTING

The Contractor shall provide Final Section 508 Compliance Test Results. The Section 508 Test Results shall include a GPAT/VPAT Conformance Statement validating conformance to Section 508 Refresh Success Criteria and Conformance Requirements for already-developed ICT deliverables.

The Final Section 508 Test Results shall be reviewed and approved by VA Section 508 representatives to validate conformance to Section 508 Refresh Success Criteria and Conformance Requirements for ICT deliverables.

For software development for VA interfaces/systems, the Contractor shall prepare and submit a Section 508 Conformance Validation Package with content as outlined in VA Process Asset Library, Software Development Product Build process map.

The Section 508 Conformance Validation Package shall be reviewed and approved by VA Section 508 representatives to validate conformance to Section 508 Refresh Success Criteria and Conformance Requirements for ICT deliverables.

Automated test tools, manual techniques, and checklists are used in the VA Section 508 compliance assessment.

Deliverable:

- A. Final Section 508 Compliance Test Results for ICT Deliverables
- B. Section 508 Compliance Validation Package for ICT Deliverables

6.3 DELIVERABLES

The Contractor shall provide deliverables for Government review and acceptance IAW with Section B.2 of the Task Order. The Contractor shall incorporate Government feedback provided via the OEHRM Deliverables review process into Task Order deliverables as applicable. Feedback shall be incorporated in either the resubmission or next required submission of the deliverable based upon the timeframe in which it is

provided by the Government. For Government feedback requiring additional discussion and/or clarification, the Contractor shall coordinate language updates with VA to resolve and finalize revisions to the affected deliverable. The Contractor shall appropriately mark and date deliverables to maintain version control using the following format: TO Number – CLIN Number Formal Deliverable Title – Deliverable Due Date IAW Section B.2– Version X.X. The Contractor shall annotate major (initial submission) and minor (resubmission) deliverable releases using a numerical system (e.g. Initial submission: TO 0001 – 0001AA Contractor Project Management Plan - August 2018 – Version 1.0; Resubmission: TO 0001 – 0001AA Contractor Project Management Plan – August 2018 – Version 1.1). Resubmitted deliverables shall maintain the original due date defined in Section B.2 of the TO. The Contractor shall provide discrete deliverables in separate email submissions. Email submissions shall include the Contract/Task Order numbers and corresponding deliverable CLIN number. The Contractor shall track updates in both major and minor deliverable releases in an agreed upon format, such that the Government can identify and review language revisions for acceptance.

CONTRACTOR EMPLOYEE PERSONAL FINANCIAL INTEREST/PROTECTION OF SENSITIVE INFORMATION AGREEMENT

This Agreement refers to Contract/Order	entered into
between the Department of Veterans Affairs and	(Contractor)

As an employee of the aforementioned Contractor, I understand that in connection with my involvement in the support of the above-referenced Contract/Order, I may receive or have access to certain "sensitive information" relating to said Contract/Order, and/or may be called upon to perform services which could have a potential impact on the financial interests of other companies, businesses or corporate entities. I hereby agree that I will not discuss or otherwise disclose (except as may be legally or contractually required) any such "sensitive information" maintained by the Department of Veterans Affairs or by others on behalf of the Department of Veterans Affairs, to any person, including personnel in my own organization, not authorized to receive such information.

"Sensitive information" includes:

- (a) Information provided to the Contractor or the Government that would be competitively useful on current or future related procurements; or
- (b) Is considered source selection information or bid and proposal information as defined in FAR 2.101, and FAR 3.104-4; or
- (c) Contains (1) information about a Contractor's pricing, rates, costs, schedule, or contract performance; or (2) the Government's analysis of that information; or
- (d) Program information relating to current or estimated budgets, schedules or other financial information relating to the program office; or
- (e) Is properly marked as source selection information or any similar markings.

Should "sensitive information" be provided to me under this Contract/Order, I agree not to discuss or disclose such information with/to any individual not authorized to receive such information. If there is any uncertainty as to whether the disclosed information comprises "sensitive information", I will request my employer to request a determination in writing from the Department of Veterans Affairs Contracting Officer as to the need to protect this information from disclosure.

I will promptly notify my employer if, during my participation in the subject Contract/Order, I am assigned any duties that could affect the interests of a company, business or corporate entity in which either I, my spouse or minor children, or any member of my immediate family/household has a personal financial interest. "Financial

interest" is defined as compensation for employment in the form of wages, salaries, commissions, professional fees, or fees for business referrals, or any financial investments in the business in the form of direct stocks or bond ownership, or partnership interest (excluding non-directed retirement or other mutual fund investments). In the event that, at a later date, I acquire actual knowledge of such an interest or my employer becomes involved in proposing for a solicitation resulting from the work under this Contract/Order, as either an offeror, an advisor to an offeror, or as a Subcontractor to an offeror, I will promptly notify my employer. I understand this may disqualify me from any further involvement with this Contract/Order, as agreed upon between the Department of Veterans Affairs and my company.

Among the possible consequences, I understand that violation of any of the above conditions/requirements may result in my immediate disqualification or termination from working on this Contract/Order pending legal and contractual review.

I further understand and agree that all Confidential, Proprietary and/or Sensitive Information shall be retained, disseminated, released, and destroyed in accordance with the requirements of law and applicable Federal or Department of Veterans Affairs directives, regulations, instructions, policies and guidance.

This Agreement shall be interpreted under and in conformance with the laws of the United States.

I agree to the Terms of this Agreement and certify that I have read and understand the above Agreement. I further certify that the statements made herein are true and correct.

Signature and Date	Company
Printed Name	Phone Number